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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	GONZ01
	First Named Inventor	Gonzalez
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS AND APPARATUS FOR TREATING METAL-WORKING FLUID

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable).

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/190,761	03/20/2000	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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Name



23892

Address

PATENT TRADEMARK OFFICE

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

Anthony H.

Family Name

Gonzalez

(first and middle [if any])

or Surname

Inventor's
Signature

Anthony H. Gonzalez

Date *3-16-2001*

Residence: City Springfield

State OR

Country US

Citizenship US

Mailing Address ALG Life Sciences

Mailing Address 633 Poltava Street

City Springfield

State OR

ZIP 97477

Country US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

Michael D.

Family Name

Birran

(first and middle [if any])

or Surname

Inventor's
Signature

Michael D. Birran

Date *3-16-01*

Residence: City Eugene

State OR

Country US

Citizenship US

Mailing Address ALG Life Sciences

Mailing Address 633 Poltava Street

City Springfield

State OR

ZIP 97477

Country US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/02A (11-00)

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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Michel

Jammal

Inventor's
SignatureDate 03.13.01Residence: City SeattleState WACountry USCitizenship USMailing Address ALG Life SciencesMailing Address 633 Poltava StreetCity SpringfieldState ORZIP 97477Country US**Name of Additional Joint Inventor, if any:**☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

Mailing Address

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State

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Country

Name of Additional Joint Inventor, if any:☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Gonzalez
Group Art Unit	
Examiner Name	
Attorney Docket Number	GONZ01

I hereby appoint:

☒ Practitioners at Customer Number

23892

OR

☐ Practitioner(s) named below:



23892

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Anthony H. Gonzalez
Signature	<i>Anthony H. Gonzalez</i>
Date	March 16, 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 3 forms are submitted.

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Gonzalez
Group Art Unit	
Examiner Name	
Attorney Docket Number	GONZO1

I hereby appoint:

☒ Practitioners at Customer Number

23892

OR

☐ Practitioner(s) named below:



23892

Name	Registration Number

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Michael D. Birran

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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Examiner Name	
Attorney Docket Number	GONZ01

I hereby appoint:

☒ Practitioners at Customer Number

23892



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SIGNATURE of Applicant or Assignee of Record

Name

Michel Jammal

Signature

Date

03-13-01

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